



An Introduction to Health Policy

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Health-care governance has seen tremendous shifts over the last 50 years: consolidation and deconstruction of health authorities, public-private partnerships (P3), resource constraints, changes to service delivery funding and informed consumers as patients. Policy has helped to shape a number of these changes. Within this upheaval, health professionals are being called to take action—specifically in the area of policy and politics. This “call to action” while not new, is unclear in exactly what the “call” looks like.¹

Why is it essential to increase one’s understanding of policy process and analysis? Policy and politics go together. Policy, an important element in all organizations, is central to how organizations manage themselves, exercise authority and align resources to support implementation and evaluation.² Health professionals (HPs) need to develop and enhance their “political competence” in order to understand, influence and use policy effectively.³ An understanding of policy and policy analysis is a prerequisite for advocacy—a critical component of wound management. For too long, HPs, especially nurses, have been noticeably absent within the health policy arena.^{4,5,*} Absence from the decision-making process has resulted in implied acquiescence to other’s agendas rather than giving voice to patients’ needs. Who is better to provide an interdisciplinary perspective than those delivering wound care? Compared to

other areas of health care, wound care has been under-served, fragmented, poorly funded and under-prioritized.⁶ The only way to make positive change is at the policy level with a rigorous and defensible approach.²

Policy development and policy analysis are perceived as mysterious, obscure processes, around which are many theories and much rhetoric. This series of articles will bring clarity to the issues. Taking a more practical approach, this first article in the series will provide definitions and set the framework for policy analysis. Following this, three practical tools for analysis will be presented, using recent provincial decisions affecting wound care delivery as examples. Bringing this work all together will be a discussion on ways to enhance policy acumen and political competence as a prerequisite for change in wound care practice, education and research.⁷ These articles will help move policy development and analysis from the hands of a “chosen few” into the mainstream so everyone committed to improving the lives of persons with wounds can contribute in this important, though sometimes neglected, area.

Policy: What It Is

According to the Oxford Dictionary, policy is defined as “a course or principle of action adopted or proposed by an organization or individual: e.g., a course of policy and wisdom.”⁸ Stated a different way, a policy includes a goal and the means

to meet that goal. The World Health Organization (WHO) defines health policy as the “decisions, plans and actions that are undertaken to achieve specific health-care goals within a society.”⁹ For the purposes of this article, policy arising out of all levels of health care will be categorized as professional, public or organizational.¹⁰

Professional policy may take the form of a resolution or position statement. The Ontario Woundcare Interest Group’s (OntWIG) resolution to Accreditation Canada to include pressure ulcer prevention as a required operation procedure (ROP) for hospital accreditation is one example of this kind of policy.**

Public policy is a formal document that addresses an issue with a recommended solution. Usually referred to within the context of provincial or national policy, the finished product may be in the form of a white paper or framework document. Two provincial examples are “Enhancing Community Care for Ontarians (ECCO),” a white paper developed and disseminated by the Registered Nurses’ Association of Ontario (RNAO),¹¹ and “Fewer Wounds, Faster Healing,” a framework document developed by the OntWIG.⁶ The more recent Canadian Association of Wound Care (CAWC) Diabetic Foot Canada project is an example of a national policy initiative. Collaborating with the Public Health Agency of Canada and the Canadian Diabetes Association, the CAWC creates and disseminates national policy recommendations for diabetic foot management.¹²

Organizational policies are generally institution- or company-specific policies. These are the ones clinicians and managers are most familiar with. These policies provide specific direction on a topic or course of action. An example would be a hospital’s policy on patient admissions.

Policy Development

Governments and health-care organizations are under intense scrutiny to do more with less. The current trend for policy-making focuses on what works, how efficiently and cost-effectively the policy may be implemented and what outcomes

need to be measured. Within this context is the ongoing debate regarding the importance of best research evidence. On the one hand, proponents for best evidence argue that the selection, evaluation and implementation of research are critical to policy development and implementation processes.¹³ Opponents argue research evidence is only one component and any quest for best evidence may delay important decisions. While evidence is important, policy analysis is useful in filtering where and when rhetoric is supported by practice.¹⁴ Health professionals must understand how decisions are made in order to influence and shape policy development and implementation.

Policy Analysis

Policy analysis refers to an inquiry that is directed toward a proposal for a specific health policy—essentially asking the questions: What is the governance process? Why is it being done? Will it



make/has it made a difference?^{2,10} With roots in political science, health policy analysis can assist in understanding and building knowledge of the policy process. Historically, much of Canadian health policy analysis has focused on the hospital service element in areas such as hospital service agreements, health-care funding reform and pharmacy costs.² Policy analysis, like wound management, is interdisciplinary and problem-centred. Analysis is heavily influenced by the health-care discipline framework used and the reason for the analysis, and therefore it is imperative for clinicians to understand policy process.²

The steps in policy analysis, to be discussed in the next issue, are similar to the wound bed preparation paradigm¹⁵ and the nursing process—elements of practice that clinicians use every day. 🍷

* Registered Nurses' Association of Ontario (RNAO) is the exception and is a strong political voice in Ontario. For more information, visit www.rnao.ca.

** More information on the resolution is available at <http://ontwig.rnao.ca>.

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